

E. N. PART B—ISSUE FEE TRANSMITTAL

102-1320
Sld-29

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FLEHR HOHBACH TEST ALBRITTON AND HERBERT
SUITE 3400
FOUR EMBARCADERO CENTER
SAN FRANCISCO CA 94111

22M2/1030

2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME	RECEIVED
Street Address	Patent Office Division
City, State and ZIP Code	JAN 5 1998
CO-INVENTOR'S NAME	08
Street Address	
City, State and ZIP Code	
<input type="checkbox"/> Check if additional changes are enclosed	

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/542,564	10/13/95	021	GREGORY, B	2202 10/30/97
First Named Applicant	MINOR,	HALSEY, M.		

TITLE OF INVENTION APPARATUS AND METHOD FOR PASSING PRIVATE DEMOGRAPHIC INFORMATION BETWEEN HYPERLINK DESTINATIONS

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
2 A-62536/WSG	380-049.000	T69	UTILITY	YES	\$1320.00 \$660.00	01/30/98

3. Correspondence address change (Complete only if there is a change)

01/26/1998 UWALKER 00000243 08542564
01 FC:142 1320.00 OP
02 FC:561 39.00 OP

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1 FLEHR HOHBACH TEST
ALBRITTON & HERBERT LLP
2 William S. Galliani

3 Clare T. Hartnett

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE:

C/NET, Inc.

(2) ADDRESS: (CITY & STATE OR COUNTRY)

San Francisco, California

6a. The following fees are enclosed:

Issue Fee Advance Order - # of Copies 13

6b. The following fees should be charged to:

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 Any Deficiencies in Enclosed Fees

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Authorized Signature) William S. Galliani (Date) 12/30/97

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Assistant Commissioner for Patents
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on: December 30, 1997

(Date)

Bobbie Jutras

(Name of person making deposit)

Bobbie Jutras
December 30, 1997

(Signature)

(Date)

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SAN FRANCISCO CA 94111

2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)	
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Street Address	Publishing Division
City, State and ZIP Code	JAN 5 1998
CO-INVENTOR'S NAME	
Street Address	
City, State and ZIP Code	
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	<p>1 <u>FLEHR HOHBACH TEST</u> <u>ALBRITTON & HERBERT LLP</u></p> <p>2 <u>William S. Galliani</u></p> <p>3 <u>Clare T. Hartnett</u></p>

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)	6a. The following fees are enclosed: <input checked="" type="checkbox"/> Issue Fee <input checked="" type="checkbox"/> Advance Order - # of Copies 13
(1) NAME OF ASSIGNEE: <u>C/NET, Inc.</u>	6b. The following fees should be charged to: DEPOSIT ACCOUNT NUMBER 06-1300 (order no. A-62536/WSG) <input type="checkbox"/> Issue Fee <input type="checkbox"/> Advance Order - # of Copies <input checked="" type="checkbox"/> Any Deficiencies in Enclosed Fees
(2) ADDRESS: (CITY & STATE OR COUNTRY) <u>San Francisco, California</u>	The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

A. This application is NOT assigned.
 Assignment previously submitted to the Patent and Trademark Office.
 Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.

PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

6a. The following fees are enclosed:
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 (Authorized Signature) William S. Galliani (Date) 12/30/97
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Assistant Commissioner for Patents
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on: December 30, 1997 (Date)
Bobbie Jutras (Name of person making deposit)
Bobbie Jutras (Signature)
December 30, 1997 (Date)

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